

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s):	Robert M. Landis	Examiner:	Not Yet Assigned
Serial No.:	10/618,799	Group Art Unit:	Not Yet Assigned
Filed:	July 14, 2003	Dated:	July 31, 2003
Title:	DYNAMIC INFANT NASAL CPAP SYSTEM AND METHOD		

Mail Stop 16  
Director of the U.S. Patent and Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attention: Refund Section, Accounting Division, Office of Finance

OFFICE OF FINANCE  
REFUND BRANCH  
2003 AUG -5 PM 3:32  
US PATENT & TRADEMARK  
OFFICE

**REQUEST FOR REFUND**  
**(Improper Charge of Deposit Account)**

**I. REFUND REQUEST**

This is a request for a refund with respect to the charge to Deposit Account No. **50-2140** shown on the statement dated **July 2003** for the above-identified application.

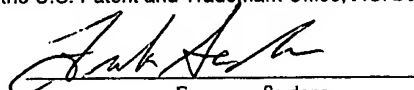
A copy of the monthly deposit account statement in which the error referred to occurs accompanies this request. Also enclosed herewith is a copy of the stamped postcard receipt, a copy of the original check for \$447.00, a copy of the Fee Transmittal Sheet as filed, a copy of the Utility Patent Application Transmittal as filed, a corrected/new Fee Transmittal Sheet, and a corrected/new Utility Patent Application Transmittal.

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**CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Mail Stop 16, Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 on July 31, 2003.

Dated: July 31, 2003

  
Francesco Sardone

II. FEES CHARGED FOR WHICH REFUND REQUESTED

AMOUNT OF REFUND  
REQUESTED

<input checked="" type="checkbox"/>	filing fee	<u>\$ 350.00</u>
<input type="checkbox"/>	surcharge for filing the basic filing fee on a date later than the filing date of the application (37 C.F.R. §1.16(e))	
	and/or	
<input type="checkbox"/>	surcharge for filing the oath or declaration on a date later than the filing date of the application (37 C.F.R. §1.16(e))	
<input type="checkbox"/>	extension of term	
<input type="checkbox"/>	first month	
<input type="checkbox"/>	second month	
<input type="checkbox"/>	third month	
<input type="checkbox"/>	fourth month	
<input checked="" type="checkbox"/>	excess claims	<u>\$ 36.00</u>
<input type="checkbox"/>	issue fee	
<input type="checkbox"/>	petition fee	
<input type="checkbox"/>	patent maintenance fee	
<input type="checkbox"/>	first maintenance fee	
<input type="checkbox"/>	second maintenance fee	
<input type="checkbox"/>	third maintenance fee	
<input type="checkbox"/>	patent maintenance fee surcharge	
<input type="checkbox"/>	other:	

PCT FEES:

- Designation fee \$88 per country for first 5 national or regional Offices	\$
- Fee for each certified copy (one requested)	\$

<b>TOTAL REFUND REQUESTED</b>	<b><u>\$ 386.00</u></b>
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### III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

Applicant claims Small Entity Status. The Fee Transmittal Sheet, as original filed, indicated that applicant claimed small entity, however, the Utility Application Transmittal, as originally filed, failed to indicate that applicant claimed small entity. The fee submitted, as indicated in the original Fee Transmittal Sheet included the filing fee for a small entity and the fee for four (4) additional claims in excess of twenty (20) for a large entity.

The monthly deposit account statement indicates that the fees for filing of the above application are based on applicant being a large entity. In addition, the Patent Office counts twenty-five (25) claims in the application as opposed to twenty-four (24), the actual claim count of the application.

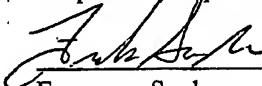
A corrected Application Transmittal is submitted herewith. Accordingly, the total fee due for the filing of the application was \$411.00. Since a check in the amount of \$447.00 was originally submitted with the application, a refund in the amount of \$386.00 is respectfully requested.

### IV. MANNER OF REFUND

Please make refund by

- ☒ crediting Deposit Account No. 50-2140  
☐ refunding payment.

Respectfully requested,

  
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Francesco Sardone  
Reg. No. 47,918

***Carter, DeLuca, Farrell & Schmidt, LLP***  
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Melville, New York 11747  
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FS/jrv



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### Deposit Account Statement

Requested Statement Month: July 2003  
Deposit Account Number: 502140  
Name: CARTER DELUCA FARRELL & SCHMIDT, LLP  
Attention: PETER DELUCA  
Address: 445 BROAD HOLLOW ROAD  
City: MELVILLE  
State: NY  
Zip: 11747

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
07/01	41	2049295		6206	\$100.00	\$4,225.00
07/08	140	10454209		9204	-\$294.00	\$4,519.00
07/11	2	10159944	273/162	1460	\$130.00	\$4,389.00
07/11	36	10434019		9204	-\$168.00	\$4,557.00
07/17	2	10618799	991-8	1001	\$303.00	\$4,254.00
07/17	4	10618799	991-8	1202	\$90.00	\$4,164.00
07/22	12	10343651		9204	-\$65.00	\$4,229.00
07/22	66	10621831	1400-10 (1538)	1202	\$18.00	\$4,211.00
07/24	10	10160460	2806 (203-31)	1806	-\$180.00	\$4,391.00
07/24	179	10406690		9204	-\$252.00	\$4,643.00
07/29	13	10460505		9204	-\$468.00	\$5,111.00
07/29	20	10460727		9204	-\$180.00	\$5,291.00
07/29	25	10460506		9204	-\$318.00	\$5,609.00

START	SUM OF	SUM OF	END
BALANCE	CHARGES	REPLENISH	BALANCE
\$4,325.00	\$641.00	\$1,925.00	\$5,609.00

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